

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Smc		1/4/99
O.I.P.E. CLASSIFIER		8	1-6-99
FORMALITY REVIEW	J.S.	69134	1-21-99

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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